Fill in this information to identify your case:	
Debtor 1 Andrew A. Arroyo  Debtor 2 Abbigale Yvonne Arroyo (Spouse, if filing)  United States Bankruptcy Court for the Eastern District of Pennsylvania  Case number (If known)	Check if this is:  ☑ An amended filing ☐ A supplement showing post-petition chapter 13 expenses as of

## Official Form 106J

## **Amended Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:		Describe Your Hou							
1.	ls ti	his a j	joint case?							
			Go to line 2.  Does Debtor 2 live in a separate household?							
			No. Yes. Debtor 2 must file	Officia	al Form 106J-2, <i>Expe</i>	enses for Separate Househo	old of Debtor 2			
	•		ve dependents?  Debtor 1 or Debtor 2.		No Yes. Fill out this	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age		Does depende with you?	nt live
		not stat	te the dependents'		information for each dependent	son	1		□ No ☑ Yes	
		our ex	xpenses include expe ts?	nses o	of people other than	yourself and your	⊠ No □ Yes			
	rt 9:		Estimate Your Ong	noina						
Est	imate	e you	r expenses as your b	ankru	ptcy filing date unle	ess you are using this for	rm as supplement in a ule J. check the box at	Chap	oter 13 case to r	eport
Est exp the Inc Sci	imate bense appl lude hedui	e your es as licable exper lle I: Y	r expenses as your b of a date after the ba e date nses paid for with nor our Income(Official F	ankru nkrup n-cast	iptcy filing date unle otcy is filed. If this is in governmental ass 1061).	ess you are using this for a supplemental Schedusistance if you know the	le J, check the box at	the to	op of the form a	nd fill
exp the Inc Sci	imate pense appl lude hedui	e your es as licable exper exper experse	r expenses as your b of a date after the ba e date nses paid for with nor our Income(Official F	ankru nkrup n-cast	iptcy filing date unle otcy is filed. If this is in governmental ass 1061).	ess you are using this for a supplemental Schedu	le J, check the box at	the to	op of the form a	nd fill
Est exp the Inc Sci	imate pense appl lude hedui	e your es as licable exper exper experse	r expenses as your b of a date after the ba e date nses paid for with nor our Income(Official F	ankru nkrup n-cast	iptcy filing date unle otcy is filed. If this is in governmental ass 1061).	ess you are using this for a supplemental Schedusistance if you know the	le J, check the box at	the to	op of the form a	nd fill
Est exp the Inc Sci	imate appl lude hedui	e youres as licable experience I: Y	r expenses as your b of a date after the ba e date nses paid for with nor our Income(Official F	ankrupn-cast	iptcy filing date unle otcy is filed. If this is in governmental ass 106I). debtor(s)' primary resi	ess you are using this for a supplemental Schedusistance if you know the sidence(s), if any, are reported	le J, check the box at	the to	op of the form and have included by the state inco	nd fill
Est exp the Inc Sci	timate pense applicate: Expense	e youres as licable exper experse annex	r expenses as your b of a date after the ba e date nses paid for with nor Your Income(Official F es for property other tha xed to Schedule I.	ankrupn-cast	iptcy filing date unle otcy is filed. If this is in governmental ass 106I). debtor(s)' primary resi	ess you are using this for a supplemental Schedusistance if you know the sidence(s), if any, are reported	le J, check the box at	the to	op of the form and have included have includ	nd fill
Est exp the Inc Sci	imate applude hedulite: Exense  The morto	e youres as licable experule I: Y	r expenses as your b of a date after the base date anses paid for with nor Your Income(Official Fees for property other that exed to Schedule I.	ankrupn-cast	iptcy filing date unle otcy is filed. If this is in governmental ass 106I). debtor(s)' primary resi	ess you are using this for a supplemental Schedusistance if you know the sidence(s), if any, are reported	ule J, check the box at value of such assistant ed in the Summary of Bu	the to	op of the form and have included have includ	nd fill
Est exp the Inc Sci	imate pense appl lude the te: Expense  The mortour lift not 4a.	e your es as licable exper experse anne:  rental tagage put include Real of	r expenses as your b of a date after the base date anses paid for with nor Your Income (Official First Forms of the second of th	ankrupn-cask	iptcy filing date unle otcy is filed. If this is in governmental ass 106I). debtor(s)' primary residence ground or lot.	ess you are using this for a supplemental Schedusistance if you know the sidence(s), if any, are reported	ule J, check the box at value of such assistant ed in the Summary of Bu	the to	op of the form and have included have includ	nd fill

			Your expenses					
	4d. Homeowner's association or condominium dues	4d.						
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$225.00					
6.	Utilities:							
	6a. Electricity, heat, natural gas	6a.	\$155.00					
	6b. Water, sewer, garbage collection	6b.	\$100.00					
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$290.00					
	6d. Other. Specify: N/A	6d.						
7.	Food and housekeeping supplies	7.	\$550.00					
3.	Childcare and children's education costs	8.	\$450.00					
9.	Clothing, laundry, and dry cleaning	9.	\$80.00					
10.	Personal care products and services	10.	\$60.00					
11.	Medical and dental expenses	11.	\$125.00					
2.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$390.00					
13.	Entertainment, clubs, recreation, newspapers, magazine, and books	13.	\$100.00					
4.	Charitable contributions and religious donations	14.						
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.							
	15a. Life insurance	15a.						
	15b. Health insurance	15b.	\$400.00					
	15c. Vehicle insurance	15c.	\$195.00					
	15d. Other insurance. Specify: N/A	15d.						
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: N/A	16.						
7.	Installment or lease payments							
	(None)	17.	\$0.00					
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I</i> (Official Form 106I)	18.						
19.	Other payments you make to support others who do not live with you. Specify: N/A	19.						
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I (Official Form 106I)							
	20a. Mortgages on other property	20a.						
	20b. Real estate taxes	20b.						
	20c. Property, homeowner's, or renter's insurance	20c.						
	20d. Maintenance, repair, and upkeep expenses	20d.						
	20e. Homeowner's association or condominium dues	20e.						
	20f. Other. Specify:	20f.						

	Document 1 age 3 of 3		
			Your expenses
21.	Other. Specify: pet expense	21.	\$140.00
22.	Calculate your monthly expenses.		
	22a. Add lines 4 through 21.	22a.	\$4,300.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	
	22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$4,300.00
23.	Calculate your monthly net income  23a. Copy line 12 (your combined monthly income) from Schedule I	23a. <u> </u>	\$4,304.39
	23b. Copy your monthly expenses from line 22 above.	23b.	\$4,300.00
	23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income	23c.	\$4.39
24.	Do you expect an increase or decrease in your expenses within the year after you file this form	n?	
	For example, do you expect to finish paying for your car loan within the year or do you expect your m because of a modification to the terms of your mortgage?	ortgage payment	to increase or deci
	No □ Yes. Explain		